

Is the Storm Ever Over?

NCPA and Hurricane Helene

NCPA 2025

Conflict of Interest

- Dr. Garrett has no conflicts of interest with ineligible companies
- Dr. Jonalagadda has no conflicts of interest with ineligible companies

CONTENT WARNING:

This presentation contains potentially sensitive material and photos discussing the events and impact of Hurricane Helene.

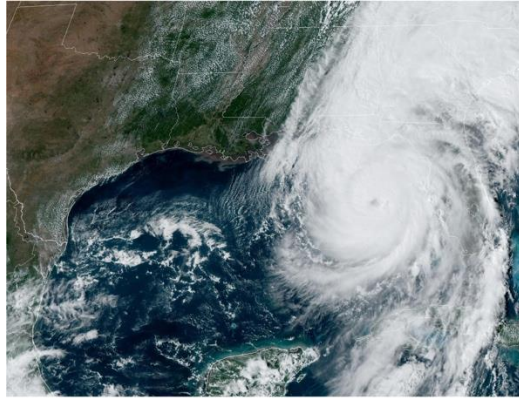
Discretion is advised, and you are encouraged to prioritize your well-being while engaging with the material.

Thank you.

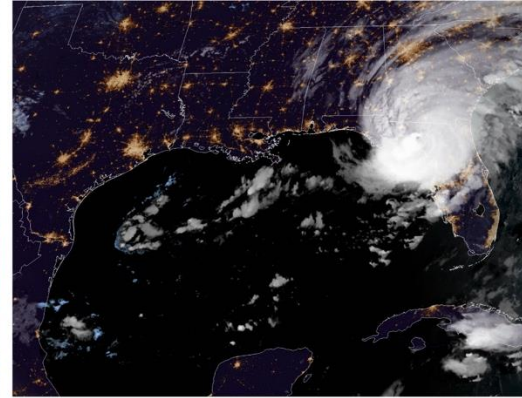
Objectives

- Review health infrastructure impacts to NC from Hurricane Helene, NCPA response to Helene and continued impacts to the region and workforce
- Detail how psychiatrists can prepare and volunteer for future disasters
- Recommend changes that can better address likely future disaster scenarios and needed mental health response

Helene



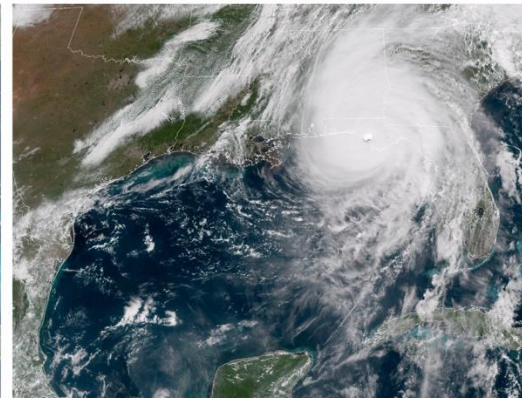
HELENE (Sept. 26)
420 miles wide



IDALIA (2023)
219 miles



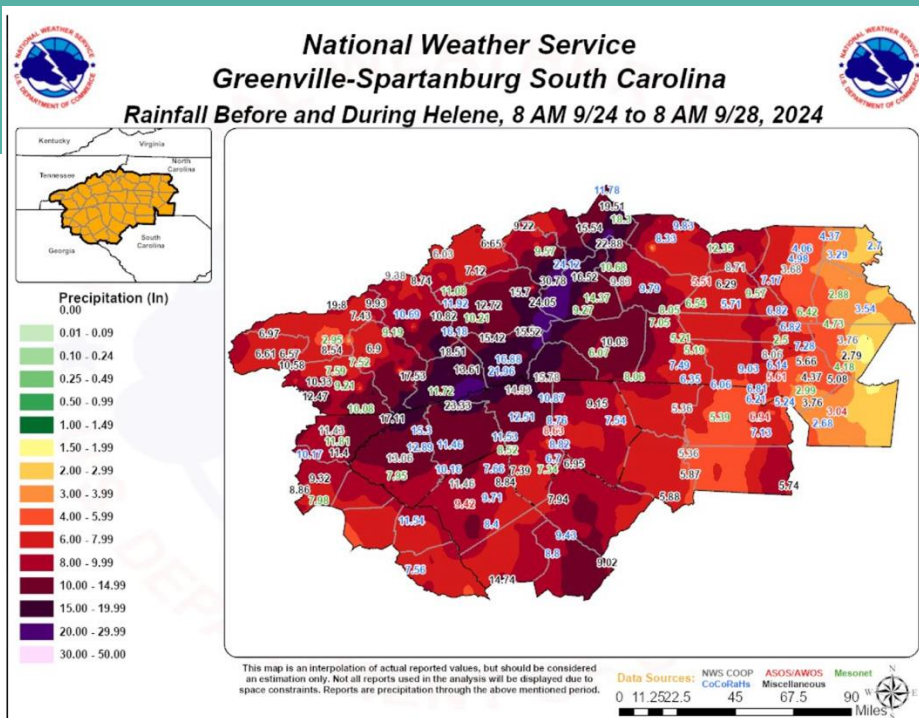
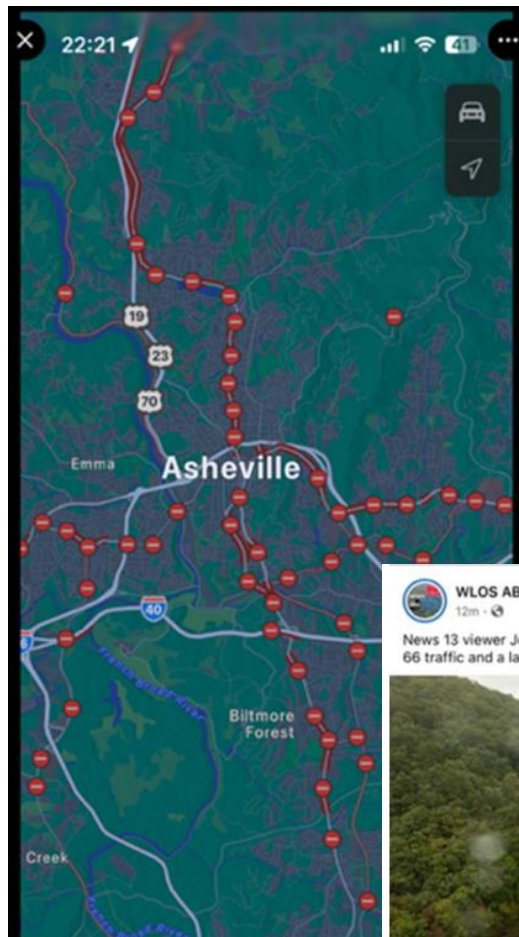
IDA (2021)
247 miles



MICHAEL (2018)
272 miles

Courtesy of the Washington Post

- Category 4 hurricane: Made landfall in Florida's Big Bend region on September 26, 2024
- Catastrophic flooding, extreme winds, deadly storm surge, and numerous tornadoes across the southeastern U.S. and southern Appalachians.
- Moved inland during the early morning hours of September 27, 2024, impacting the western part of North Carolina.



Max Rainfall Totals From 8 AM 9/24 to 8 AM 9/28

| Busick (NC) | | Yancey County | | 30.78 |
|-----------------------------|-------|-----------------------------|-------|-------|
| Spruce Pine 6.6 SW (NC) | 24.12 | Seneca 8.9 N (SC) | 12.89 | |
| Hendersonville 6.1 SSW (NC) | 21.96 | Travelers Rest 8.9 N (SC) | 12.88 | |
| Rocky Bottom 3.1 E (SC) | 21.66 | Pickens 6.9 W (SC) | 12.37 | |
| Slater-Marietta 6.4 NW (SC) | 18.12 | Clayton 4 SE (GA) | 12.25 | |
| Davidson River (NC) | 18.02 | Cruso 4.5 NW (NC) | 11.95 | |
| Mountain Home 0.9 WNW (NC) | 17.09 | Brevard 2.1 E (NC) | 11.65 | |
| Pine Mountain 4.7 NE (GA) | 16.76 | Rainbow Springs 1.1 NE (NC) | 11.61 | |
| Table Rock (SC) | 16.51 | Hartwell 5.6 NW (GA) | 11.54 | |
| Candler 6.6 SW (NC) | 16.18 | Greenville 5.4 WNW (SC) | 11.53 | |
| Tryon 0.8 W (NC) | 15.78 | Mount Mitchell (NC) | 11.22 | |
| Grandfather Mountain (NC) | 15.42 | Waynesville 4.1 S (NC) | 11.14 | |
| Salem 1.9 NE (SC) | 15.30 | Taylorsville (NC) | 10.93 | |
| Highlands (NC) | 14.86 | Cherokee (NC) | 10.69 | |
| Banner Elk 0.7 W (NC) | 14.85 | Toccoa (GA) | 10.38 | |
| Tallulah (GA) | 14.57 | Clemson 0.8 NE (SC) | 10.16 | |
| North Cove Pinnacle (NC) | 13.87 | Lenoir 10.6 NNE (NC) | 9.83 | |
| Mills River 2.7 N (NC) | 13.26 | Morganton 3.0 SSE (NC) | 9.79 | |
| Swannanoa 2.8 N (NC) | 13.21 | Anderson (SC) | 9.42 | |
| Liberty (SC) | 13.12 | Greenville-Spartanburg (SC) | 8.63 | |



US National Weather Service Greenville-Spartanburg SC

26 September 2024 · 🌐



URGENT MESSAGE

This will be one of the most significant weather events to happen in the western portions of the area in the modern era. Record flooding is forecasted and has been compared to the floods of 1916 in the Asheville area. The impacts from this event are expected to be greater than Tropical Storm Fred from August 2021, the mountains in 2004 from Frances and Ivan, and in Upstate South Carolina the Saluda River Basin flooding from 1949. We plead with everyone that you take every single weather warning very seriously through the entirety of this event as impacts will be life-threatening and make sure to have multiple ways to receive the alerts. The protection of life and property is the overall mission of the National Weather Service, and we pledge to stand by the folks of the western Carolinas and northeast Georgia. We cannot stress the significance of this event enough. Heed all evacuation orders from your local Emergency Managers and go to a storm shelter if you do not feel safe at your current location.

Hurricane Helene will make landfall later this evening near the Big Bend of Florida. Significant to catastrophic, life-threatening flooding will occur along and near the Blue Ridge Escarpment. Historic flooding will be possible in this area as an additional 9-14" of rainfall will be in store. Many landslides will occur as a result, with a few large and severely damaging slope failures or debris flows are likely.

Possible hurricane-force gusts in the North Carolina mountains, northeast Georgia, and the western portion of Upstate South Carolina. 60-70 mph wind gusts possible elsewhere. The combination of strong winds and super saturated soils will lead to widespread trees down and numerous power outages.

- Widespread power outages and communications disruptions– required backup generators for many hospitals and facilities for days to weeks
- 22 acute care hospitals initially impacted by the storm
- Inability to reach facilities by phone to identify open clinics, crisis centers, hospitals, pharmacies
- Widespread water system failures- required well drilling, porta-potties, potable water distribution for ~60 days in Buncombe county and parts of Mitchell County

Disaster Trivia 1

This grocery store chain is known for its disaster preparedness, including having a generator, and/or gasoline storage at its stores.

A: Harris Teeter

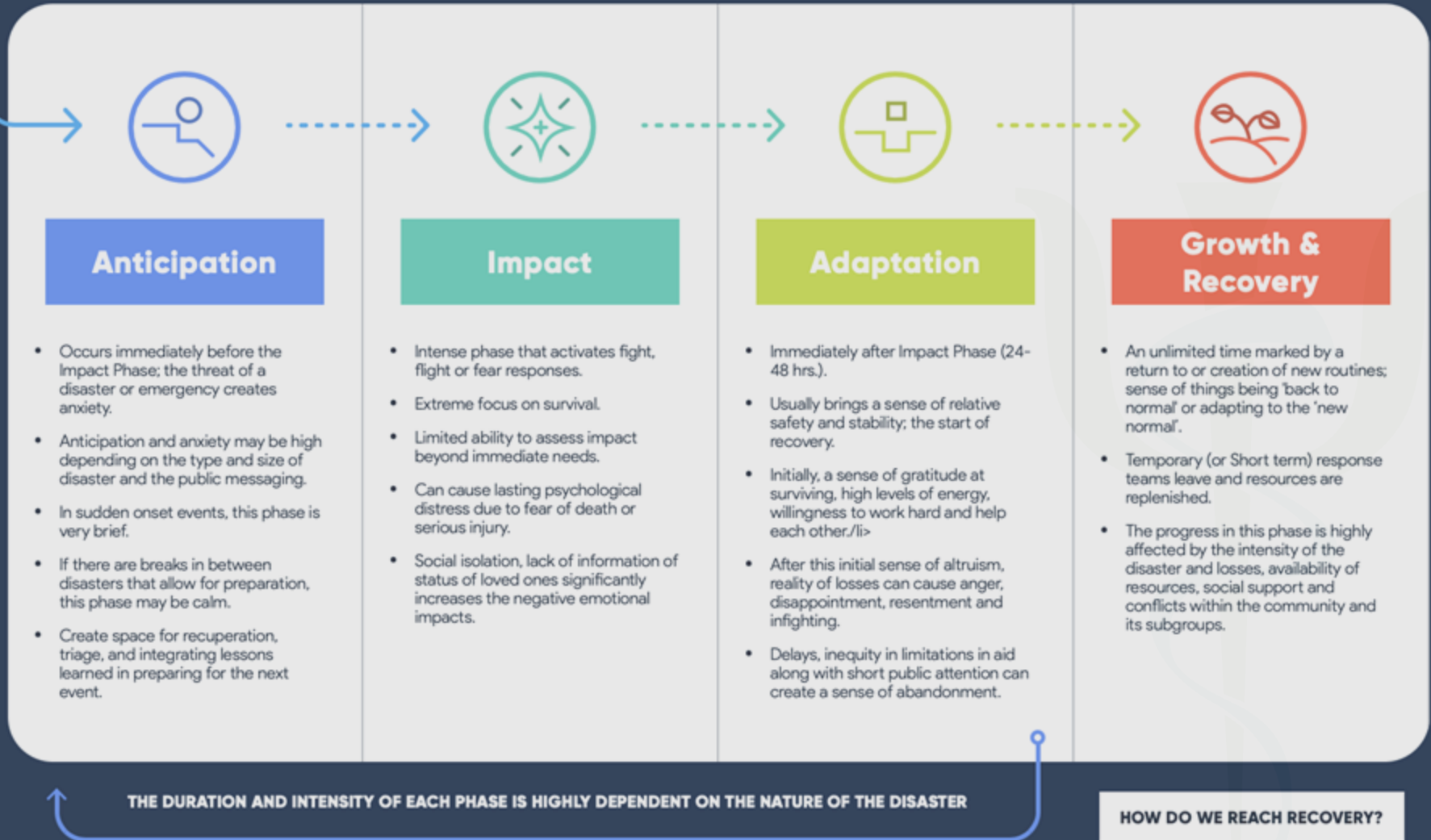
B: Publix

C: Food Lion

D: Ingles

E: Trader Joe's

Phases of Disaster



Substance Use Treatment Impacts

- Disruption to supply can lead to unintended detox, risks from withdrawal, overdose risks from use of 'different suppliers'
- Opioid Treatment Programs able to support patients and guest dosing within first week
- Needs for additional naloxone supplies
- Barriers to access for buprenorphine continuity
- JFK ADATC impact- patients moved to Broughton Hospital

MH/IDD Services Impacts

- Multiple hospitals with loss of power/water and communication infrastructure
- FBC/BHUC closures
- Mobile crisis lines and services remained fully functional throughout, including early diversion of calls to non-impacted regions of the state
- Displacement of residents from Black Mountain Neuro-medical through mid-December
- Impact to care homes and group homes

- Increased dissemination of accurate and timely information, but also rapid spread of misinformation
- Social connectedness, outreach and coordination of community supports
- Bombardment by inability to get away from the news
- Enhanced spread of fear and distress

“We’ve got piles and piles and piles of dead bodies,” Conway said in the video.

“We’ve got 18-wheeler refrigerator trucks filled up with dead bodies... Why is there such a disparity between the reality of what I’m seeing here and what you’re getting told?”



Man accused of making threat says he believed social media reports of FEMA refusing to help



1. Hurricane Helene was NOT geoengineered by the government to seize and access lithium deposits in Chimney Rock.
 - Nobody can control the weather.
 - Charles Konrad, director of the National Oceanic and Atmospheric Administration's Southeast Regional Climate Center, has confirmed that no one has the technology or ability to geoengineer a hurricane.
 - Current geoengineering technology can serve as a large-scale intervention to mitigate the negative consequences of naturally occurring weather phenomena, but it cannot be used to create or manipulate hurricanes.



FEMA

NC Helene Response

- **September 25, 2024:**

- Governor Roy Cooper declared a State of Emergency for North Carolina in advance of the storm, and the U.S. Department of Health and Human Services declared a Public Health Emergency for the state, retroactive to the declaration date.

- **September 26-28, 2024:**

- Medical and behavioral health practices, clinics and systems across the state attempt to take care of their own needs, while also identifying and attempting to outreach their high risk/ high needs members
- Initial Medicaid flexibilities go into effect, including prior authorization overrides for medication refills, emergency medication fills and authorization waivers
- NC Board of Pharmacy develops ‘Open Pharmacy’ list

- **Early October 2024:**

- Some community crisis centers in North Carolina began to re-open to provide immediate support for individuals experiencing mental health crises.
- NC Medical Society develops 'Open medical practice' list
- DEA provides 'exception letter' clarifying that Schedule 3/4/5 medications (including buprenorphine) available under emergency medication fill rule

- **October 2024 - Ongoing:**

- Needs of those with chronic and underlying mental health conditions heighten with service disruptions, community disruptions, trauma
- As initial shock subsided, challenges of recovery and the extended timeline for rebuilding became apparent

NC Helene Response

- **November 2024 - Ongoing:**

- NCDHHS continues to provide information and promote resources, highlighting investments to support recovery efforts in affected areas.
- Hope4NC funding for crisis counseling received
- *Somethings* app- mental health peer support for teens launched for NC youth

- **June 2025:**

- NCDHHS Secretary Dev Sangvai on a visit to Western North Carolina, emphasized the ongoing importance of mental health resources and support during the long recovery process

Disaster Trivia 2

Hurricanes had only female names until what year?

A: 1953

B: 1968

C 1979

D; 1987

Bonus question: What is the origin of hurricane naming and why did they have female names?

Coalition Building

- **Mental health provider coalition:** The NCPA was joined by the National Association of Social Workers North Carolina and the NC Psychological Association to compile a list of mental health providers offering free or sliding-scale services.
- Direct aid to healthcare systems: NCPA members, including those affiliated with the MAHEC Psychiatry Department mobilized to address patient needs.

1-866-WNC-MIND

WNC Psychiatric Support Line

WORK FLOW

Calls will come in from 1-866-WNC-MIND, it is recommended that you save this number in your contact list. There will be primary and secondary psychiatric volunteers in the cue. If a call is not received after a minute, it will automatically be routed to the secondary psychiatrist on call. If the call goes to voicemail, an email will be sent to Nick Ladd, DO.

Each shelter has a medical provider that has been provided the WNC Mind phone number (1-866-WNC-MIND or 1-866-962-6463). Calls will be directly routed to NCPA volunteer psychiatrists who can provide consultation on psychiatric issues faced by shelter residence.

WNC-MIND will be staffed by NCPA volunteer psychiatrists who will be scheduled to cover a particular day. The WNC-MIND number will be reassigned each day to the NCPA volunteer signed up.

Community Providers, Private Practitioners & Payers

- Community MH providers at large organizations in Western and across the state provided emergency psychiatric appointments, medication evaluations and refills
- FQHC and community mental health clinicians and psychiatrists provided disaster mental health in shelters across the region
- NCPA worked with psychiatrists to:
 - Communicate about safety and the status of their practice, any needs
 - Ensure member awareness and utilization of the NC Medical Board ‘*Open Medical Practice*’ list, an iterative crowdsourced list to provide individuals with information on where to access care
 - Ensure member awareness of NCMS Practice Impact Survey
 - Ensure awareness of options for psychiatrists related to grants, as well as Medicaid hardship/stabilization payments

**Urgent! NCMS and NCMB Impact Surveys
Needed for Western North Carolina Practices**



Psychiatric Foundation of North Carolina MAHEC Hurricane Relief Fund

- Established to support MAHEC psychiatry residents who suffered significant personal and professional disruptions due to the hurricane.
- Raised >\$10,000 to support impacted residents

Regional and Workforce Impacts

Hurricane Helene significantly stressed North Carolina's care system, creating a surge in trauma, anxiety, and depression among residents while simultaneously reducing access to care due to widespread devastation, displacement, and provider shortages .

State agencies and community organizations are still providing crisis support, leveraging telehealth, and working to bolster the mental health workforce, but challenges remain in meeting the long-term and acute mental health needs exacerbated by the storm's impact on communities and individuals.

Increased Demand for Mental Health Services

Trauma and Stress:

- Helene's heavy rains and high winds triggered widespread flooding and damage, leading to elevated levels of PTSD, anxiety, and depression among survivors, according to Tactical Resiliency USA.

Vulnerable Populations:

- Children particularly at risk of trauma from the disruptions to routine and security
- First responders also faced increased fatigue, irritability, and mental strain from the disaster response
- Those with pre-existing conditions
- Those with significant loss

Regional and Workforce Impacts

Secondary Stressors:

- Displacement, financial instability, loss of social networks, and temporary living situations, such as living with friends and family or in tents, worsen existing traumas and contribute to mental health struggles
- Challenges in Care Delivery

Provider Shortages:

- Worsened shortage of clinicians in rural areas at the same time as increasing demand

Displacement and Access:

- Delivering care to displaced families is difficult, and some providers face licensing barriers when treating evacuated patients, hindering efforts to provide consistent treatment, reports NPR

Regional and Workforce Impacts

Infrastructure and Operations:

- Some mental health centers were destroyed or damaged by the storm, forcing a shift to sustaining existing operations rather than expanding services.
- Response and Support Efforts

Disaster MH and Crisis Counseling

- In the immediate aftermath, clinicians were deployed to shelters, and multiple organizations provided free supports to survivors.
- Hope4NC crisis counseling program funded through SAMHSA/FEMA

Telehealth and Policy Flexibilities:

- The NC Medicaid Program implemented policy flexibilities, including expanding telehealth and telephonic services, to increase access to behavioral health care for members

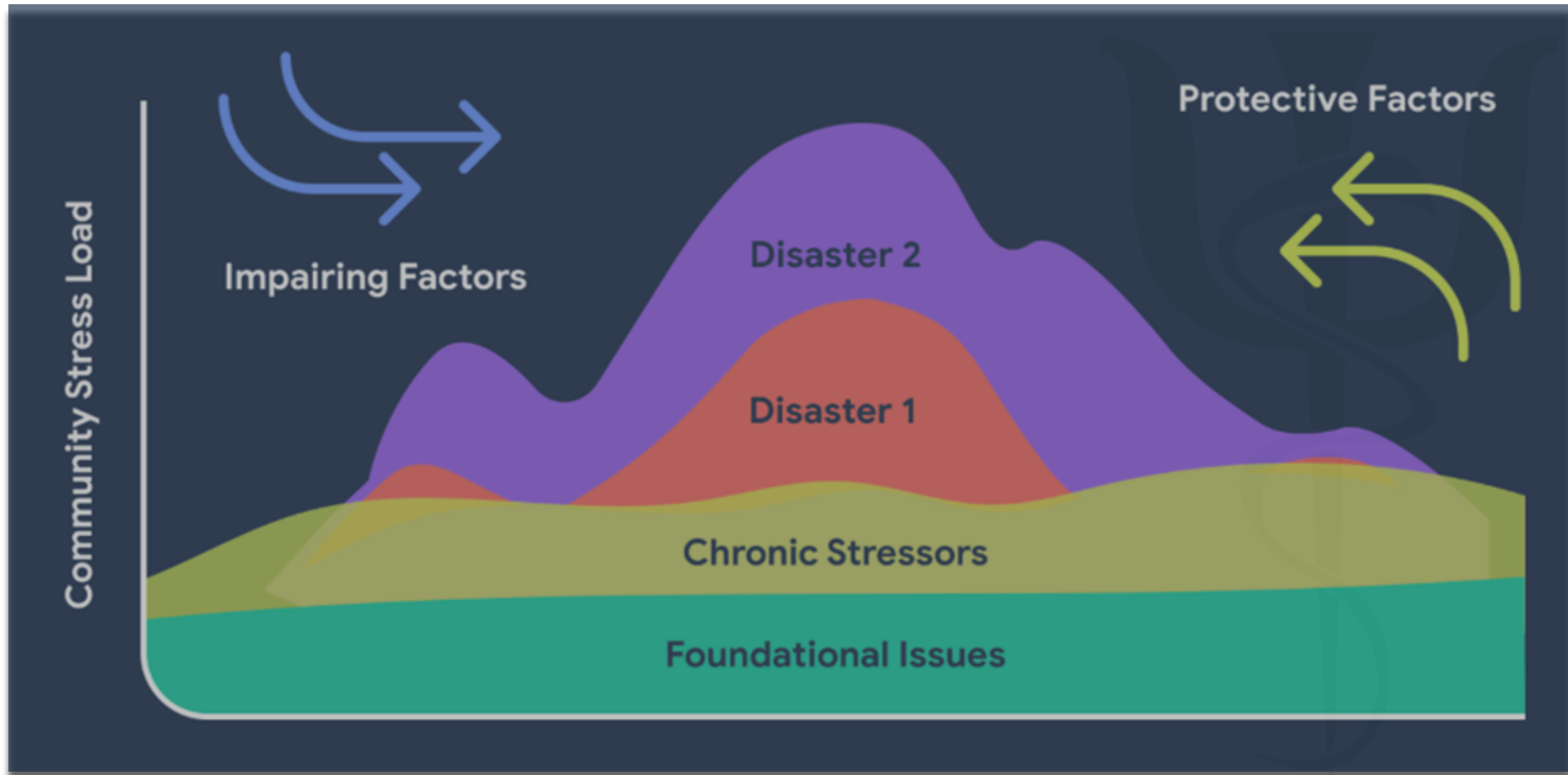
Community Partnerships:

- Groups like the Mountain Community Health Partnership are working to rebuild and sustain operations, with support from organizations like NCPA to provide essential care and aid

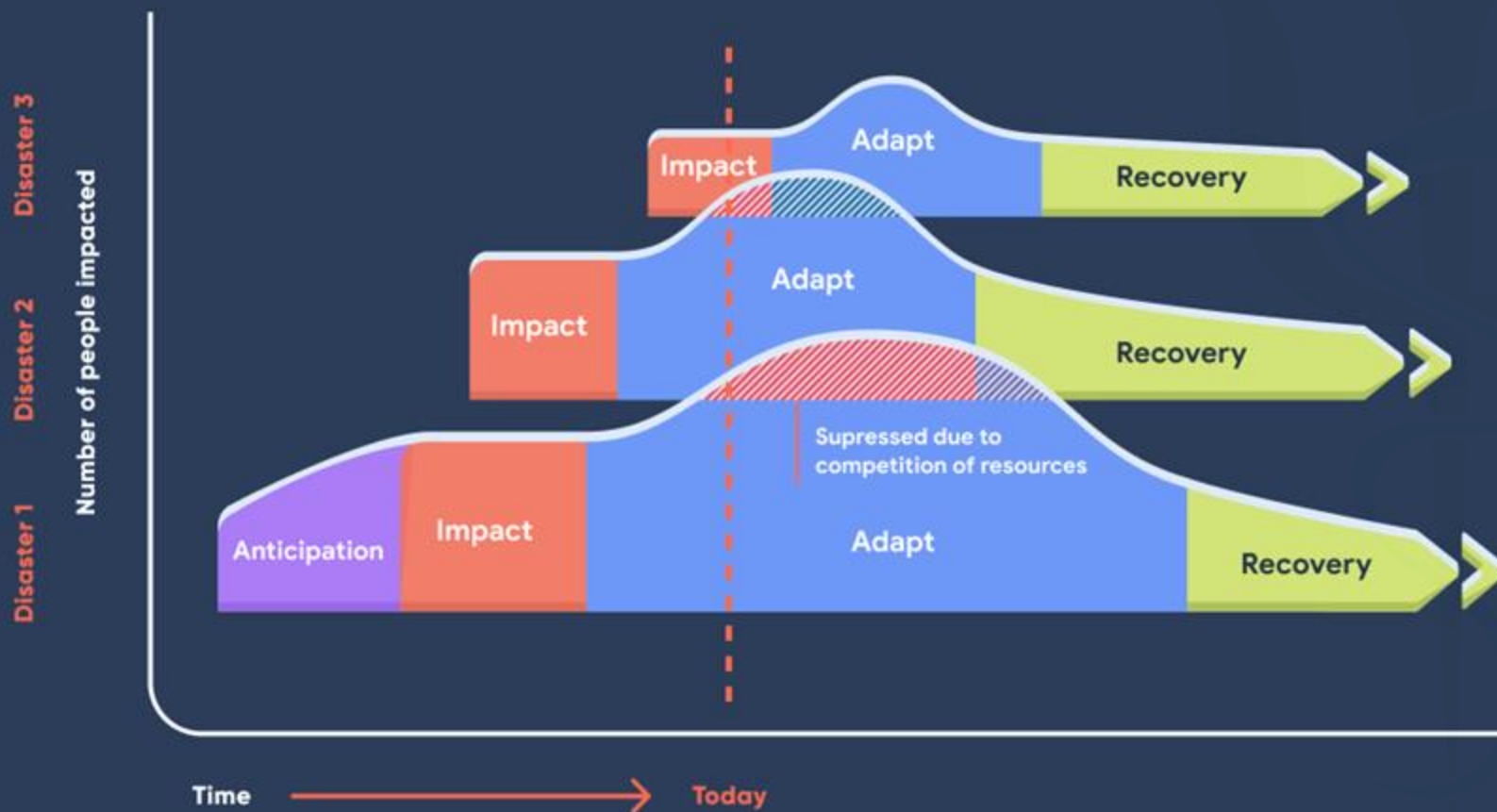
Long-Term Workforce Development:

- There is a focus on building the mental health workforce to meet the long-term needs of the affected communities, reports NPR

Chronic Cyclical Disasters Model



Cumulative Stress Load and Disaster



How Psychiatrists can Prepare and Volunteer for Future Disasters

A large, faint, light green version of the North Carolina Psychiatric Association logo is positioned in the background on the right side of the slide.

Disaster and Preventive Psychiatry: Protecting Health and Fostering Community Resilience

- Module 1:** Basic Concepts in Disaster and Preventive Psychiatry
- Module 2:** Psychological and Behavioral Effects of Disasters
- Module 3:** Risk and Vulnerability to Disasters
- Module 4:** Public Health Approaches to Interventions and Disasters
- Module 5:** Psychological First Aid
- Module 6:** Risk and Crisis Communication
- Module 7:** Leadership Consultation
- Module 8:** Disaster Responders
- Module 9:** Disaster Preparedness

National Child Traumatic Stress Network Trainings



- Free
- 5-hour training online for Psychological First Aid
- 5-hour training online for Skills for Psychological Recovery



Disaster Trivia 3

Severe unnamed thunderstorms in 1989 led to the overtopping and failure of more than a dozen dams in this North Carolina community, leading to multiple fatalities

A: Lumberton

B: Hendersonville

C: Fayetteville

D: Toxaway



**American
Red Cross**

Disaster Health Services

- Protocol specific functions for screening, limited first aid/medical assistance, connection to care
 - Predominantly Nurses
 - Is not practicing medicine

Disaster Mental Health

- Multidisciplinary teams
- Must be actively licensed MH provider (Masters level or higher)
- Typically, non-MD/DO clinicians

Deployments typically require at least 7 to 10 days availability



Volunteer Opportunities

- Best to do as part of a current disaster relief organization
- Attempts to volunteer solo often not possible
- Need for proper specialized training
 - Need for certain credentials
 - Ability to engage with current structure to ensure coordination, appropriate protective equipment
- Provides best chance for appropriate use of your skills and expertise



Volunteer Opportunities through NCPA

- WNC MIND- Developed through MAHEC
- Disaster Committee
 - Working with NC Disaster Behavioral Health Task Force
 - Partnership and liaison with other professional organizations/societies (NC Psychological Association /NASW-NC)



NC Mental Health Providers in Response to Hurricane Helene

<https://www.ncdhhs.gov/news/press-releases/2024/10/10/behavioral-health-resources-available-people-impacted-hurricane-helene>

Disaster Mental Health Pearls

- Limit media exposure- photos, videos, social media, on-site
- Self-care and Responder Care – exposure impacts everyone. Self check and check in on others doing the work to support coping
- Disaster continues after the event

Disaster Mental Health vs. Traditional MH

Disaster Mental Health

- Assumption of resilience
- Respond to: Psychosocial and emotional needs of people affected by disaster
- Goal: Alleviate immediate emotional distress and mitigate long-term consequences
- Augment, not replace: Community mental health resources
- Brief Interventions
- Address: Basic Needs
- Reduce: Stress
- Facilitate: Problem solving, good coping skills, psychoeducation and task-centered activities

Traditional MH Services

- Based on diagnostic evaluations with a treatment plan done in an office-based or other formal practice setting
- “Doctor-Patient Relationship” = Professional boundary
- Informed Consent
- HIPAA- Privacy and Confidentiality
- Payment

The Future

Lessons for future disasters: The MAHEC Psychiatry Department's efforts during Hurricane Helene have been used to create recommendations for logistical and policy changes to better prepare health care organizations for future disasters.

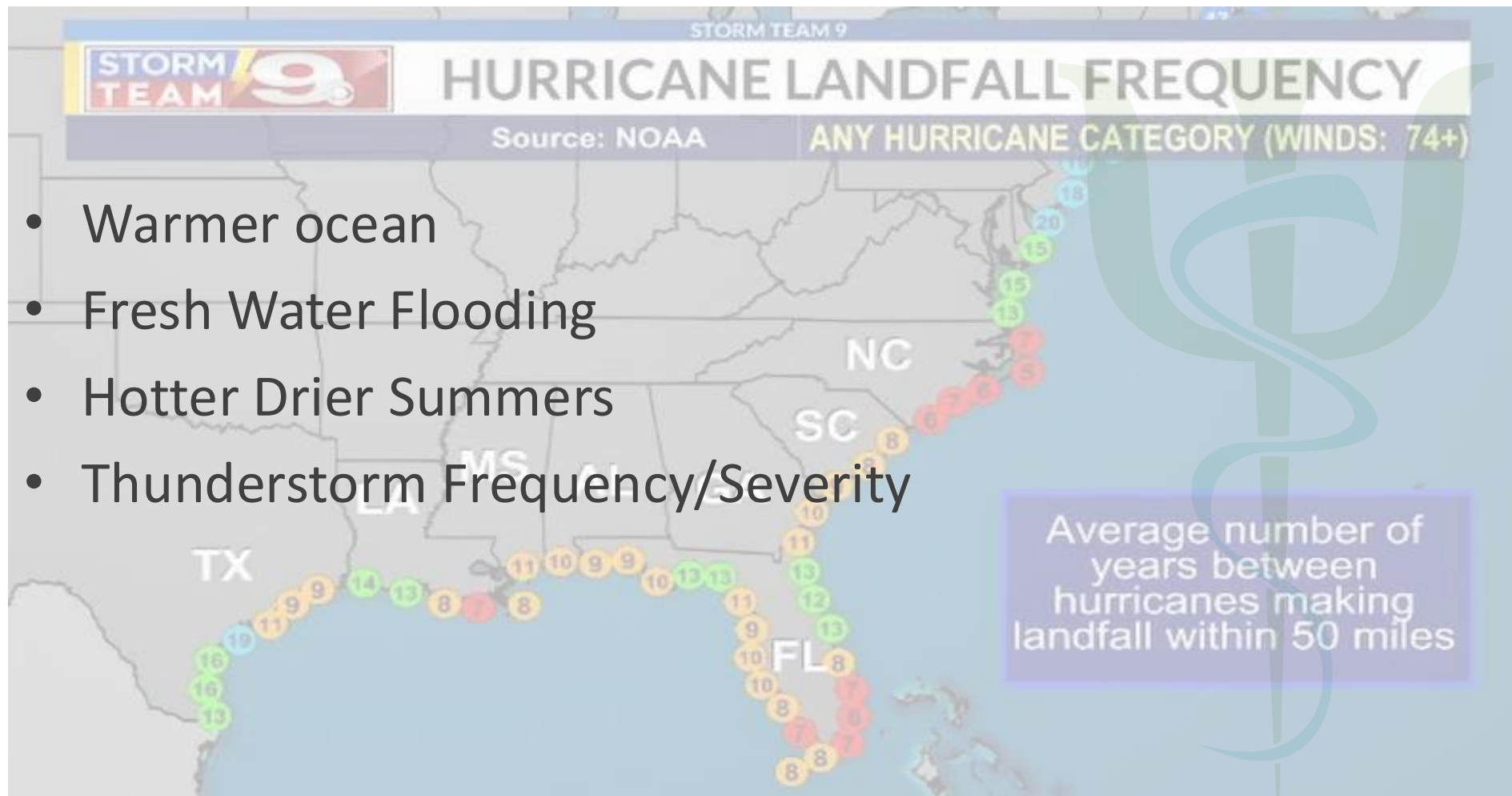


Pharmacy

- Proactive communication to psychiatrists about potential disaster related pharmacy flexibilities to prevent/limit medication disruptions
- Disaster planning with patients around medications for opioid use disorder, naloxone, long-acting injectables, stimulants, clozapine

Changing Disaster Risks

- Warmer ocean
- Fresh Water Flooding
- Hotter Drier Summers
- Thunderstorm Frequency/Severity



Future NCPA Response

- Continued participation in the interprofessional Disaster Behavioral Health Network and deepening partnerships with NC Psychological Association and NASW-NC.
- Continued relationships with health systems, provider organizations, payers, NC-DHHS to support preparedness
- Opportunities to revive successful initiatives in new disasters, including WNC-MIND

Disaster Trivia 4

The bypass pipe from the North Fork reservoir supplying water to Buncombe county (that was destroyed in the flooding after Hurricane Helene) was buried approximately how far below the water line?

A. 8 feet

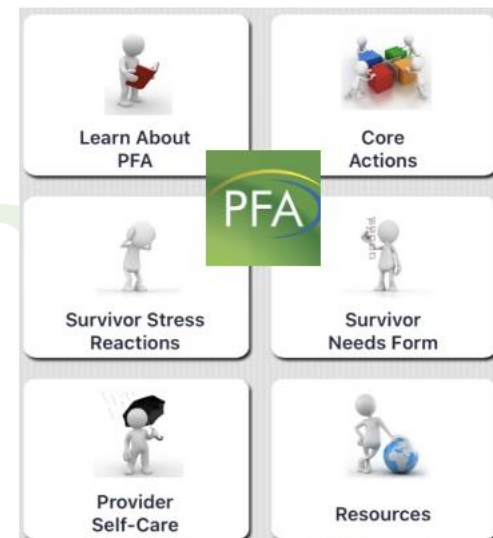
B. 50 feet

C: 25 feet

D: 18 feet



Preparedness/ Response Apps

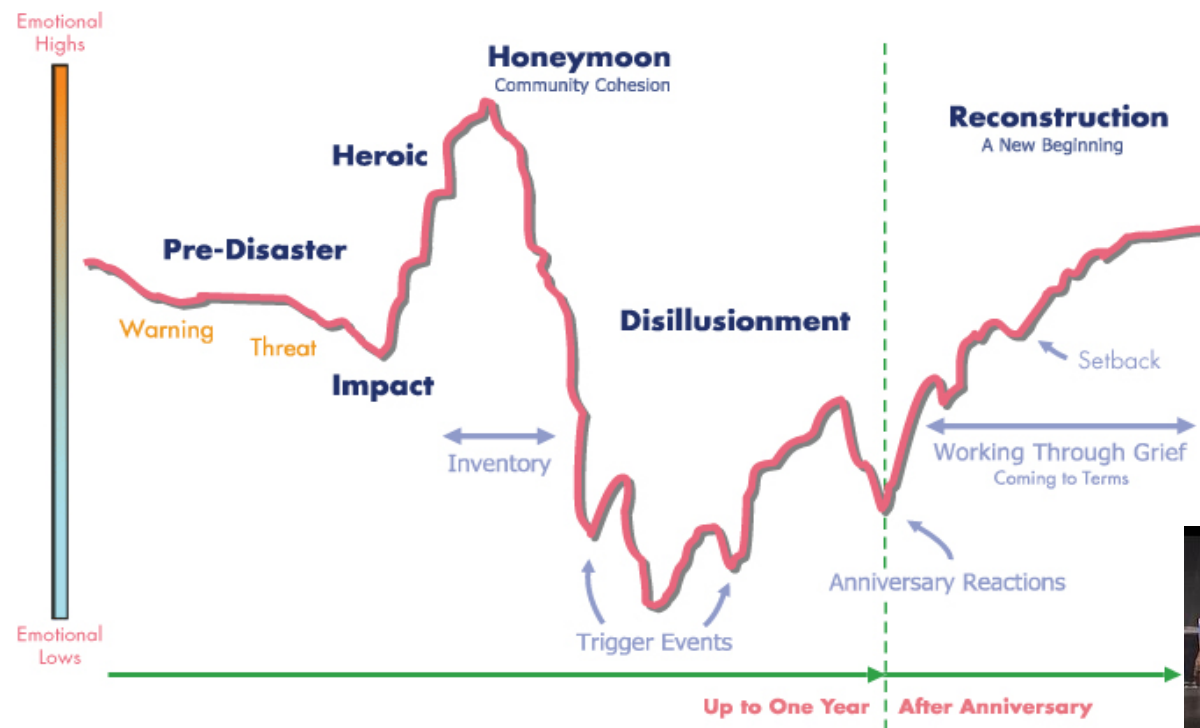


Help Kids Cope



NCTSN RESOURCE ⓘ

Is it Ever Over?



Special Thanks

Katy Kranze, Lana
Frame, Anna Godwin

NCPA members and
other mental health
professionals living or
serving those in WNC

All who stepped in to
support after the
storm from
unimpacted areas

Special thanks to the
MAHEC residents and
fellows

Our loved ones for
being our source of
wellness